U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Standards Washington, DC 20210 LM-2 LABOR ORGANIZATION ANNUAL REPORT MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRIESTEES LID

TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1215-0188 Expires: 07-31-2004

This report is mandatory under P.1. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE	RE PREPARING THIS REPORT.
For Official Use Only 1. FILE NUMBER 2. PERIOD COVERED	3. (a) AMENDED — If this is an amended report correcting a previously
	YEAR filed report, check here: (b) TERMINAL — If your organization ceased to exist and this is its
	terminal report, see Section XII of the instructions and check here:
E Through 1 2 3 1 2	0 0 2 (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:
8. MAILING ADDRES	S
DERHARD TYLER (2) 012-435 First Name	
TEAMSTERS AFL-CID BERNA	R D
LU 49	
14 LOOF HILL RD DRACUT, MA 01826 12/2002 TYIFR	
DRACUT, MA 01826 12/2002 TYLER	
P.O. Box · Building ar	nd Room Number (if any)
4. AFFILIATION OR ORGANIZATION NAME	ON HILL ROAD
TEAMSTERS AFL-CIO	
5. DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NUMBER 1 4 L O	ON HILL ROAD
LU 49 <u>City</u>	
7. UNIT NAME (if any)	T "="
State 7ID Code	
9. Are your organization's records kept at its mailing address? Yes No MA 0 1	8 2 6 -
9. Are your organization's records kept at its mailing address? Yes No MA 0 1	0 2 0 -
75. ADDITIONAL INFORMATION	
Item Number	
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penaltie accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and the undersigned is the undersigned in the undersigned in the undersigned is the undersigned in the	es of law, that all of the information submitted in this report (including the information contained in any sellief, true, dorries, and contained in any
76. PRESIDENT 77. SIGN	
SIGNED: (If other title,	(If other title,
3/26/03 9784529126 see instructions.)	3/26/03 19/24529/26 see instructions.)
Date Telephone Number	Date Telephone Number
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During the Report	ing Period Did Your Organization:			18.	How many members				
	diary organization" as defined in	Yes	No X		organization have at t reporting period?	the end of the		4	9 0
Section X of ti	he instructions?	<u>. </u>		19.	What is the date of you		MO 1 1	YE. 2 0	0 3
	icipate in the administration of a fund or organization, as defined			20.	What is the maximum		ole		
	ons, which provides benefits for neir beneficiaries?		X		under your organization of a loss caused by a	•			0 0
					employee of your orga	anization?		0 0	0 0
	al action committee (PAC)		X	21.	What are your organiz				
13. Acquire or dis	pose of any goods or property in		✓		applies for any line.)	Rates of	Dues and Fee	es	
any manner o	ther than by purchase or sale?		X		(a) Regular Dues/Fees	\$	per	, Year, etc	<u></u>
	or review of its books and records accountant or by a parent body				(b) Initiation Fees	\$			
	entative?	X			(c) Transfer Fees	\$			
	loss or shortage of funds or		X		(d) Work Permits	\$0	per	, Year, etc	z.)
(Answer "Yes	?" even if there has been repayment	Ц		22.	During the reporting p	period, did your org	anization		
or recovery.)					have any changes in other than rates of du		•	Yes	No
	per who was paid \$10,000 or more ization and also received \$10,000 or				procedures listed in the	ne instructions?	· · · · · · · · · · · · · · · · · · · ·	X	
more as an of	ficer or employee of another labor or of an employee benefit plan?	X			procedures have char	•			
17. Liquidate or re	educe any liabilities without	 1		23.	Were any of your orga				
	of cash?		X		at the end of the repo	rting period?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X	
				24.	Did your organization liabilities at the end of				X
	any of the above questions is "Yes," pro ained in the instructions for each item.)		ails	•	the answer to Item 23 om 75.)	or 24 is "Yes," prov	vide details in	1	

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Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
25. Cash		5 0 7 7 1	7 3 5 2 2
26. Accounts Receivable		1 0 3 4 0	1 0 1 6 4
27. Loans Receivable	1	0	0
28. U.S. Treasury Securities		0	0
29. Investments	2	0	0
30. Fixed Assets	5	1 5 5 2	1 5 3 3 0
31. Other Assets	3	1 4 5 5	1 6 7 6
32. TOTAL ASSETS		6 4 1 1 8	100692
LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
33. Accounts Payable		1 0 0 6 4	1 2 8 4 4
34. Loans Payable	8	0	1 3 1 7 2
35. Mortgages Payable		0	0
36. Other Liabilities	4	0	0
37. TOTAL LIABILITIES		1 0 0 6 4	2 6 0 1 6
38. NET ASSETS (Item 32 less Item 37)		5 4 0 5 4	7 4 6 7 6
-	Item 25. Cash	ASSETS SCH #	ASSETS SCH # Period (A)

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Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

CASH RECEIPTS Item	From SCH #	AMOUNT	CASH DISBURSEMENTS Item	From SCH #	AMOUNT
39. Dues		2 4 6 6 7 0	56. To Officers	9	57109
40. Per Capita Tax		0	57. To Employees	10	2 9 3 2 7
41. Fees	į.	2 5 5 1 1	58. Per Capita Tax		4 9 7 9 6
42. Fines		0	59. Fees, Fines, Assessments, etc		0
43. Assessments		0	60. Office & Administrative Expense	13	2 9 6 4 1
44. Work Permits		0	61. Educational & Publicity Expense		0
45. Sale of Supplies		3 7 5 1	62. Professional Fees		4 1 3 3
46. Interest		7 9 7	63. Benefits	11	3 9 1 3 4
47. Dividends		0	64. Contributions, Gifts & Grants	12	6 2 5
48. Rents		0	65. Supplies for Resale		9 1 1 3
49. Sale of Investments & Fixed Assets	6	3 5 0 0	66. Direct Taxes		8 8 3 1
50. Loans Obtained	8	1 4 0 0 0	67. Withholding Taxes		2 4 5 6 2
51. Repayments of Loans Made	1	0	68. Purchase of Investments & Fixed Assets	7	1 6 4 9 4
52. On Behalf of Affiliates for Transmittal to Them		0	69. Loans Made	1	0
53. From Members for Disbursement on Their Behalf		0	70. Repayment of Loans Obtained	8	8 2 8
54. Other Receipts	14	1 2 3 8	71. To Affiliates of Funds Collected on Their Behalf		0
·			72. On Behalf of Individual Members		0
			73. Other Disbursements	15	3 1 2 3
55. TOTAL RECEIPTS		2 9 5 4 6 7	74. TOTAL DISBURSEMENTS		272716

Enter Amounts in Dollars Only - Do Not Enter Cents

SCHEDULE 1 – LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting	Loans		Repayments Recei	ved During Period	Loans
period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)	Outstanding at Start of Period (B)	Loans Made During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1,					
		4			
2.					
					· · · · · · · · · · · · · · · · · · ·
3.					
4. Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0	0	0	0
6. Totals of Lines 1 through 5	0	0	0	0	0
The totals from Line 6 are entered in		Item 69	Item 51		Item 27
1440 (7)	Column (A)	<u>.</u> <u>.</u>		with Explanation	Column (B)

SCHEDULE 2 - INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES)

SCHEDULE 3 - OTHER ASSETS

Descríption (A)	Amount (B)	Description (A)	Book Value (B)
Marketable Securities		1. Security deposit	1 0 0 0
1. Total Cost	0	2. Prepaid expenses	6 7 6
2. Total Book Value	0	3.	
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.		4.	
(a) None	0	5.	
(b)		6. Total from additional pages (if any)	
(c)		7. Total of Lines 1 through 6	1 6 7 6
(d)		The total from Line 7 is entered in	Item 31, Column (B)
Other Investments 4. Total Cost	0	SCHEDULE 4 - OTHER I	LIABILITIES
5. Total Book Value	0	Description (A)	Amount at End of Period (B)
List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.		1. None	0
(a) None	0	2.	
(b)		3.	
(c)		5.	
(d)			
(e) Total from additional pages (if any)		6. Total from additional pages (if any)	
7. Total of Lines 2 and 5	0	7. Total of Lines 1 through 6	0
The total from Line 7 is entered in	Item 29, Column (B)	The total from Line 7 is entered in	Item 36, Column (D)
() (O (D -) d (OOOD)			D 0-440

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+ SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 0 1 2 - 4 3 6

Description (A)	Cost or Other Basis (B)						
1. Land (give location): None	0		0				
2. Totals from additional pages (if any)			/ :				
3. Buildings (give location): None	0	0	0	0			
4. Totals from additional pages (if any)				. "			
5. Automobiles and Other Vehicles	1 4 8 6 4	1 4 8 6	1 3 3 7 8	0			
6. Office Furniture and Equipment	8001	6049	1 9 5 2	0			
7. Other Fixed Assets	0	0	0	0			
8. Totals of Lines 1 through 7	22865	7535	15330	0			
The total from Line 8, Column (D) is entered in			Item 30, Column (B)				

SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobile	24104	0	3500	3500
2.				
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	24104	0	3500	3500
	7. Less Reinvestments			0
	8. Net Sales			3 5 0 0
The total from Line 8 is entered in				tem 49

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SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 1 2 - 4 3 6

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Automobile	14864	14864	14864
2. Computer, Monitor, Printer	1630	1630	1630
3.			
4.			
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	16494	16494	16494
	7. Less Reinvestments		0
	8. Net Purchases		1 6 4 9 4
The total from Line 8 is entered in			Item 68

SCHEDULE 8 -- LOANS PAYABLE

Source of Loans Payable at Any	Lagra Owed at	Laana Ol		Repayr	nent Made	During Period	1 0 1 -1
Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Ot During F (C)	Period	Cash (D)(1)		Other Than Cash (D)(2)	Loans Owed at End of Period (E)
_{1.} Jeanne D'arc C.U.	, 0	1 4	0 0 0	8	2 8	0	13172
2.							
3.							
4.							
5. Totals from additional pages (if any)							
6. Totals of Lines 1 through 5	0	1 4	0 0 0	8	2 8	0	13172
The total from Line 6 is entered in	Item 34	Item 5	50	Item 70	*************		

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SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 1 2 - 4 3 6

	(A) Name (List all persons who held office during the reporting penthey received no salary or other disbursements.)		Gross (before t	taxe	es a	and		T	Disbursements for Official	Other						
	(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.	Status (C)*	other de	duc D)	ctio	ns))	Allowances (E)	Business (F)	Disbursements (G)			Tota (H)			
	TYLER BERNARD		5	۱ 19	Ь	2	F	0	4491	0		E	, 4	ı	<u>,</u>	7
1.	PRESIDENT/BA	C					;									
	LEVESQUE STEVEN			l i	5 I	0	O	0	0	0			ŀ	2	0	0
2.	SECTY TREASURER	C														
	CERAMI JOSEPH			J '	9 (8	5	0	171	0			2	1	5	<u>L</u>
3.	RECORDING SECTY	C														
	HOWARTH DENNIS			1 i	5 I	0	0	ם	8.7	0			ŗ	2	ð	7
4.	RECORDING SECTY	C														
	BEAUDRY FRANCIS			l i	2 (0	0	0	0	0			7	2	G	0
5.	TRUSTEE	C														
	HORMAN MICHAEL		,	l '	ų į	5	2	0	а	0			l	4	5	2
6.	TRUSTEE	C														
	LABOZZIERE JOHN			l i	2 (0	0	0	2 2	0			ı	2	2	2
7.	TRUSTEE	C														
8.	Totals from additional pages (if any)															
9.	Totals of Lines 1 through 8		6	7	8	6	3	0	4771	0			7 2	2 6	3	4
									10. Less Deduction	as	1	5	5	2	5	;
	The total from Line 11 is entered in			•••••				Item 56	11. Net Disbursem	ents	5	7	1	0	9	}
*Cı	ode for Status (C): past officer - P; continuing officer - C; new offi	cer during th	ne reporting p	perio	od -	N.		···	(If any officer was no your organization's c	nt elected at a regular electronstitution and bylaws, es	xtion xplaii	in acc	ordar m 75	ice v	vith	

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inization's constitution and bylaws, explain in Item 75.)
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 1 2 - 4 3 6

DAVIS NAUREEN 3 7 2 0 5 0 0 0 3 7 1. BOOKKEEPER 2		Total (H)			ırsements	s and for Official Other			1	and	xes uctio	ross S ore ta r ded (D	(bef		(B) Position (Enter employee's job
2 4. 5. 6. Totals from additional pages (if any) 7. Totals for all employees who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who, during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period, received 310.000 or lens loves who during the reporting period and any artificial state who during the reporting period and any artificial state who during the reporting period and any artificial state who during the reporting period and any artificial state who during the reporting period and any artificial state who durin	2 0 5	7 2	3		0	וכ		0	 -	0 5				VIS MAUREEN	ZIVAG
4. 5. 6. Totals from additional pages (if any) 7. Totals for all employees who, during the reporting period, received \$10.000 or less in total disbursements from your organization and any affiliates 8. Totals of Lines 1 through 7 3.8.3.6.4 9. Less Deductions 9.0															1. BOOKKEEPER
4. 5. 6. Totals from additional pages (if any) 7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates 8. Totals of Lines 1 through 7 38364 9. Less Deductions 9 0															2.
5. 6. Totals from additional pages (if any) 7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates 8. Totals of Lines 1 through 7 9. Less Deductions 9. 0		-									1207				3.
6. Totals from additional pages (if any) 7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates 8. Totals of Lines 1 through 7 38364 0 0 0 3 9. Less Deductions															4.
7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates 8. Totals of Lines 1 through 7 9. Less Deductions 9 0															5.
any affiliates 8. Totals of Lines 1 through 7 3 8 3 6 4 9. Less Deductions 9 0														als from additional pages (if any)	6. Totals from additional pages (if a
9. Less Deductions 9 0	1 1 5 9	1			0		0	0		5 9	1	1		als for all employees who, during the reporting period, received ,000 or less in total disbursements from your organization and	7. Totals for all employees who, dur \$10,000 or less in total disbursen
	3 3 6 4	38			0	0	0	0		6 4	3 3	3 8		ıls of Lines 1 through 7	8. Totals of Lines 1 through 7
	3 7	0 3	9			าร	9. Less Deductions								
The total from Line 10 is entered in	2 7	3 2	9	2		nents	10. Net Disburseme		. Item 57					e total from Line 10 is entered in	The total from Line 10 is entered

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SCHEDULE 11 - BENEFITS

FILE NUMBER: 0 1 2 - 4 3 6

Description (A)	To Whom Paid (B)		oun C)	t		
1. Health and welfare	Northern N.E. Benf. Trust	1	9	4	1	4
2. Pension	NETT Pension Trust	1	9	7	2	0
3.						
4.						
5. Total from additional pages (if any)				•		
6. Total of Lines 1 through 5		3	9	1	3	4
The total from Line 6 is entered in		Ite	em 6	33		

SCHEDULE 12 -**CONTRIBUTIONS, GIFTS & GRANTS**

Description (A)	Amount (B)		
1. Local charities	6	2	5
2.			
3.			
4.			
5.	· · · · · · · · · · · · · · · · · · ·		
6.		· - · · · ·	
7. Total from additional pages (if any)			
8. Total of Lines 1 through 7	6	2	5
The total from Line 8 is entered in	Item 64		
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SCHEDULE 13-OFFICE & ADMINISTRATIVE EXPENSE

Description (A)			ount 3)	•		
1. Rent		1	1	6	7	5
2. Supplies and printing			2	1	0	3
3. Postage			2	2	3	8
4. Telephone			4	7	2	5
5. Utilities			1	8	6	8
6. Flowers, cards and bibles				4	3	3
7. Total from additional pages (if any)			6	5	9	9
8. Total of Lines 1 through 7		2	9	6	4	1
The total from Line 8 is entered in Item 60						

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SCHEDULE 14 - OTHER RECEIPTS

Description Amount (B) (A) 1 Overpayment on check-off 2 4 6 2 Collection - returned checks 9 9 2 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15, 16. Total from additional pages (if any) 1 2 3 8 17. Total of Lines 1 through 16 The total from Line 17 is entered in Item 54

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)	Amount (B)		
1.Steward expense	6	5	0
2.Dues refund	4	8	0
3.Interest expense	1	4	9
4. convention expense	8	9	2
5. Checks returned NSF	9	5	2
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16. Total from additional pages (if any)			
17. Total of Lines 1 through 16	3 1	2	3
The total from Line 17 is entered in Item 73			

ORGANIZATION NAME: TEAMSTERS AFL-CIO	FILE NUMBE
ENDING DATE OF PERIOD COVERED: 12/31/2002	

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE (continued)

Description (A)	Amount (B)			
Repair and Maintenance	2	4	4	1
Insurance	2	6	7	7
Bank Charges		4	6	1
Out of Town Travel	1	0	2	0

ORGANIZATION NAME:	_
TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	_
12/31/2002	

75. ADDITIONAL INFORMATION

Item Number	The Least union's guidit was performed by the Cortified Dublic Association firm of Dags Mastersia and R. Corresponding
14	The Local union's audit was performed by the Certified Public Accounting firm of Ross, Mastrogiovanni & Company P.C.
rm LM-2 (Revise	

ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION(continued)

tem Number			
16 Name: Bernard Tyler Other Organization: Teamsters Joint Council	SI #40		
Other Organization: Teamsters Joint Counc	M # 10		
}			
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•		
ORGANIZATION NAME:		
TEAMSTERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

75. ADDITIONAL INFORMATION (continued)

Item Number		\neg
23	Union automobile is colateral for an automobile loan at the Jeanne D'arc C.U.	-
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ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

75. ADDITIONAL INFORMATION (continued)

Item Number	
22	The Local is governed by a uniform Constitution prescribed by the International Brotherhood of Teamsters, and the International Union will file the changes to the Constitution on the Local's behalf.
1	
1	
Form I M 2 (Poving	4 2000)